



# PRE-APPLICATION FOR TRAINING ACCELERATION GRANT CONSORTIUM LIST

State Form 52730 (7-06)

INDIANA WORKFORCE DEVELOPMENT

Applicant Name: \_\_\_\_\_

Company Name: \_\_\_\_\_ NAICS: \_\_\_\_\_ FEIN: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

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